

AO 440 (Rev. 12/09) Summons in a Civil Action

UNITED STATES DISTRICT COURT

for the
Western District of Texas

SERGIO MATA AGUILAR

Plaintiff

v.

ELIAS GASTELOS, JR., CHIEF COUNSEL, ET AL.

Defendant

Civil Action No. EP-13-CV-141 FM

SUMMONS IN A CIVIL ACTION

To: *(Defendant's name and address)* ELIAS GASTELOS, JR., CHIEF COUNSEL
1545 HAWKINS BLVD., SUITE 275
EL PASO, TEXAS 79925

FILED
2013 JUL 31 AM 11:02
CLERK, U.S. DISTRICT COURT
WESTERN DISTRICT OF TEXAS
BY _____ DEPUTY

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are: SERGIO MATA AGUILAR, A #091-438-120
26 MCGREGOR RANGE ROAD
CHAPARRAL, NM 88081

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

CLERK OF COURT

Date: 05/06/2013

S. Portillo

Signature of Clerk or Deputy Clerk

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

PLAINTIFF
SERGIO MATA AGUILAR

COURT CASE NUMBER
EP:13-CV-141-FM

DEFENDANT
ELIAS GASTELOS, JR., CHIEF COUNSEL, ET AL.

TYPE OF PROCESS
SUMMONS, ORDER, COMPLAINT

SERVE AT { NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN
ELIAS GASTELOS, JR., CHIEF COUNSEL
ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)
1545 HAWKINS BLVD., SUITE 275 EL PASO, TX. 79925

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW

SERGIO MATA AGUILAR, A #091 438 120
26 MCGREGOR RANGE ROAD
CHAPARRAL, NM 88081

Number of process to be served with this Form 285 3

Number of parties to be served in this case 5

Check for service on U.S.A. X

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

Fold

Fold

Signature of Attorney other Originator requesting service on behalf of:

☒ PLAINTIFF
☐ DEFENDANT

TELEPHONE NUMBER

(915) 534-6725

DATE

05/06/2013

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process	District of Origin No. 80	District to Serve No. 80	Signature of Authorized USMS Deputy or Clerk	Date 6-6-13
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I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.

☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)

☐ A person of suitable age and discretion then residing in defendant's usual place of abode

Address (complete only different than shown above)

Date 6-7-13 Time ☐ am ☐ pm

Signature of U.S. Marshal or Deputy

Service Fee 8.00	Total Mileage Charges including endeavors 10.70	Forwarding Fee	Total Charges 18.70	Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund*) 18.70
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REMARKS:

Sent cert mail 7012 1010 0002 4489 8812 6-6-13

PRINT 5 COPIES:

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com®

EL PASO

Postage	\$ 5.05	Postmark Here
Certified Fee	3.10	
Return Receipt Fee (Endorsement Required)	2.55	
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$ 10.70	

Sent To
 ELIAS GASTELOS, JR., CHIEF COUNSEL
 1545 HAWKINS BLVD., SUITE 275
 EL PASO, TX 79925

PS Form 3800

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

EP-13-CV-141-FM

ELIAS GASTELOS, JR., CHIEF COUNSEL
 1545 HAWKINS BLVD., SUITE 275
 EL PASO, TX 79925

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 x *Lisa Rylander* ☐ Agent ☐ Addressee

B. Received by (Printed Name) *Lisa Rylander* C. Date of Delivery *JUN 2 2013*

D. Is delivery address different from item 1? ☐ Yes
 If YES, enter delivery address below: ☐ No

3. Service Type
☐ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number
 (Transfer from service label)

7012 1010 0002 4489 8812

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540